

Additional foreign application numbers are listed on a supplemental priority data sheet attached hereto.



Declaration/Power Of Attorney for Utility or Design Patent Application (continued)

I hereby appoint:							
$\sum_{i=1}^{n}$ Practitioners at Customer	Number <u>23122</u>						
OR							
Practitioner(s) named below:							
Name		Registration Number					
							
as my/our attorney(s) or agent(s) to Patent and Trademark Office connec	prosecute the application ic ted therewith.	dentified above, and t	to transact al	I business in the United States			
Direct all correspondence to: Practitioners Customer Number listed above; OR							
Correspondence Address Below							
Name:							
name.		· · · · · · · · · · · · · · · · · · ·					
Address:	T			-			
City:	State:		Zip:				
Country:	Telephone:		Fax:				
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
			511 4.5				
Name of Sole or First Inventor:		A Petition has been filed for this unsigned inventor.					
Given Name (first and middle (if any))		Family Name or Surname					
Daniel		Burri					
Inventor's Signature		Date: 22.12.2005					
Residence: City: Konolfingen	State:	Country: Switzerland Citizenship: Switzerland					
Mailing Address: Buchwaldstrasse	1						
Mailing Address:							
City: Konolfingen	State:	Zip: CH-3510	Cour	ntry: Switzerland			
Additional inventors are listed on the next page.							



Declaration/Power Of Attorney for Utility or Design Patent Application (continued)

Name of Second Inventor:		A Petition has been filed for this unsigned inventor.				
- Given Name (first and middle (if any))		Family Name or Surname				
Martin		Fröhlich				
Inventor's Signature M. Jatu	il		Date: 22.12.2005			
Residence: City: tiebefeld Kom2	State:	Country: Switzerland	Citizenship: Switzerland			
Mailing Address: Neuhausweg 35 Felctrainstrasse 16						
Mailing Address:						
City: Liebefeld	State:	Zip: CH-3097	Country: Switzerland			
Name of Third Inventor:		A Petition has been filed for this unsigned inventor.				
Given Name (first and middle (if any))		Family Name or Surname				
Inventor's Signature			Date:			
Residence: City:	State:	Country:	Citizenship:			
Mailing Address:						
Mailing Address:						
City:	State:	Zip:	Country:			
Name of Fourth Inventor:		A Petition has been filed for this unsigned inventor.				
Given Name (first and middle (if any))		Family Name or Surname				
	<u></u>					
Inventor's Signature		Date:				
Residence: City:	State:	Country: Citizenship:				
Mailing Address:						
Mailing Address:						
City:	State:	Zip:	Country:			
Additional inventors are listed on Supplemental Sheet(s).						